

## n Finance Report m

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APR 1 2 2016

	Form CPF M 102: Campaigr Municipal For Office of Campaign and Politics
Commonwealth of Massachusetts	

le with: EAST LONGMEAT ty or Town Clerk or Election Continus	Please print or type all info	ormation, except signature	s.
Fill in dates: Reporting Period Beginning	Month Date Feb Year	Ending 3	Datc Year 7 20/10
Type of report: (Check on ⊠8th day preceding prelim		n □30 day after electio	n □year-end report □dissolution
Derend of Office Sough	didate (if applicable)  Selectman  the and District  Cast Augustadus  tial Address	Po Box 126	Tel No (optional)
	Tel. No. (optional)		Tel. No. (optional)
Line 2: To Line 3: St Line 4: To Line 5: Et  Line 6: To Line 7: To Line 8: Na  Affidavit of Committee Treasure I certify that I have examined this r finance activity, including all contri	report including attached schedules and it is, to	riod (page 3, line 14) ine 4) nis period (page 4) ties (page 4) the best of my knowledge and betweents, in-kind contributions and this committee in accordance with	\$ 7/5.00 \$ 7/5.00 \$ 282.25 \$ 432.75 \$ 300.00
May	Signed wider the pena	miles of perjury.	4/12/11 <sub>e</sub>
Treasurer's signature (in ink)	R CANDIDATE FILINGS C	NI.V. (CANDIDATE MUS	T SIGN RELOW)
Affidavit of Candidate: (check 1 Candidate with Committee an I certify that I have examined this finance activity, of all persons acticontributions, incurred any liabilitie Candidate without Committee I certify that I have examined this finance activity, including contributions.	box only)  Indicate the committee report including attached schedules and it is, to any under the authority or on behalf of this comes nor made any expenditures on my behalf due to R Candidate with independent activity for report including attached schedules and it is, to	o the best of my knowledge and be mmittee in accordance with the req ring this reporting period. Illing separate report to the best of my knowledge and be tents, in-kind contributions and lift this committee in accordance with	elief, a true and complete statement of all campai juirements of M.G.L. c. 55. I have not received a elief, a true and complete statement of all campai abilities for this reporting period and represents t

#### SCHEDULE A: RECEIPTS

M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only itemize those receipts over \$50. In addition, the occupation and employer must be reported for all persons who contribute \$200 or more in a calendar year.

This page may be copied if additional pages are required to report all receipts. Please include your committee name and a page number on each page.

Date Received	Name and Residential Address (alphabetical listing required)	Amount		Occupation & Employer (for contributions of \$200 or more)
2/3/12	Calcasda	200	00	
3/28/16	Min Barbara Catlender 11 Pondview D7 Springhold MA 0118-1151	100	07	Pastor
2/3/14	Fast Lacenes ( MA 0 1028	100	00	
1129/16	Alex morse Il finder Street 01046	100	00	Mayorafitayoke
10 m				
	·			
		-		
Line 9:	Total receipts in excess of \$50 (or listed above)	500	00	
<del></del>	Total receipts \$50 and under* (not listed above)	215	00	
Line 11:	TOTAL RECEIPTS IN THE PERIOD	715	00	Enter on page 1, line 2

<sup>\*</sup> If you have itemized receipts of \$50 and under include them in line 9. Line 10 should include only those receipts not itemized above.

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#### SCHEDULE B: EXPENDITURES

M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period. Committees must keep detailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures \$50 and under may be added together, from committee records, and reported on line 13.

This page may be copied if additional pages are required to report all expenditures. Please include your committee name and a page number on each page.

Date Paid	(alphabetical listing)	Address	Purpose of Expenditure		ount
3/5/11	ELEEF	Fast Losgneader)	Ti cket besterd var stapp Porchas of Confegint and miss of Prizes	et a , ,	
710114		No.7	Porchas of Consegn Fondais D	216	00
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		Line 12:	Expenditures over \$50	216	00
		Line 13:	Expenditures \$50 and under*	6 le.	25
E	Enter on page 1, line 4	Line 14:	TOTAL EXPENDITURES	282	25

<sup>\*</sup>If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

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# SCHEDULE C: "IN-KIND" CONTRIBUTIONS

Please itemize contributors who have made in-kind contributions of more than \$50. In-kind contributions \$50 and under may be added together from the committee's records and included in line 16.

Date Received	r from the committee's records at From Whom Received*	Residential Address	Description of Contribution	Value
Received				The second secon
			1	
				Ì
	1	Line 15:	In-kind over \$50	The same of the sa
,-			In-kind \$50 and under	50
	Enter on page 1, line 6		Total In-kind	50

<sup>\*</sup> If an in-kind contribution is received from a person who contributes more than \$50 in a calendar year, you must report the name and address of the contributor; in addition, if the contribution is \$200 or more, you must also report the contributor's occupation and employer.

### SCHEDULE D: LIABILITIES

M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well as those liabilities incurred during this reporting period.

Date	To Whom Due	Address	Purpose	Amount
Incurred		1/2 94		· · · · · · · · · · · · · · · · · · ·
3/1/16	Dombee photography	43 Ferris St Indian Orchard, N.H. 01151	Campaign Photos	300,00
				ts.
	Enter on page 1, line 7	Line 18: OUTSTANDING	G LIABILITIES (ALL)	300,00

This page may be copied if additional pages are required to report all activity. Please include your committee name and a page number on each page.